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Request for Continued Examination (RCE) Transmittal

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Request	Application Number	10/541,500-Conf. #2009	
for Continued Examination (RCE) Transmittal	Filing Date	July 7, 2005	
	First Named Inventor	Yasutaka OGASAWARA, et al	
	Art Unit	2146	
Mail Stop RCE Commissioner for Patents	Examiner Name	G. W. Li	
P.O. Box 1450 Alexandria. VA 22313-1450	Attorney Docket Number	SON-3141	

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

Submission required under 37 CFR 1.114 amendments enclosed with the RCE will be entered applicant does not wish to have any previously filed amendment(s).	n the order in which they w	ere filed u	nless applic	cant instructs otherwise. If	
a. x Previously submitted. If a final Office may be considered as a submission e			ments filed	d after the final Office action	
i. X Consider the arguments in the Ame	endment previously filed o	on	-	December 18, 2007	
ii. Other					
b. Enclosed					
i. Amendment/Reply	iii. Information	Disclosu	re Statem	ent (IDS)	
ii. Affidavit(s)/Declaration(s)	ivOther				
2. Miscellaneous					
a. Suspension of action on the above-ide	ntified application is requ	uested ur	nder 37 Cf	FR 1.103(c) for a	
period of months. (Period	of suspension shall not ex	ceed 3 ma	nths; Fee u	under 37 CFR 1.17(i) required)	
b. Other				,, ,	
		. 4 41	DOC :- 61-		
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.					
a. X The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any					
overpayments to Deposit Account No. <u>18-0013</u> . I have enclosed a duplicate copy of this sheet.					
i. X RCE fee required under 37 CFR 1.17(e)					
ii. X Extension of time fee (37 CFR 1.136 and 1.17)					
iii. Other					
b. Check in the amount of \$	encle	osed			
c. Payment by credit card (Form PTO-203	9 analogod)			'	
c. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide					
credit card information and authorization on PTO-2038.					
SIGNATURE OF ARPLICANY ATTORNEY, OR AGENT REQUIRED					
Signature	40,290	Date		ry 21, 2008	
Name (Print/Type) Ronald P. Kananen / Phris	topher M. Tobin	Registra	ation No.	24,104 / 40,290	
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